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Bank Commissioner  
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Deputy Bank Commissioner

# State of New Hampshire

## Banking Department

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### **SALES FINANCE COMPANY FORM 361-A-AR**

#### **NH ANNUAL REPORT - GENERAL INSTRUCTIONS**

1. Information provided in this form is aggregated and an analysis is published by the New Hampshire Bank Commissioner in his Annual Report to the Governor and Executive Council. The accuracy of the information is also important because it will be used by the New Hampshire Banking Department ("the department") if assessment calculations are needed.
2. All Sales Finance Companies licensed in accordance with NH RSA 361-A during any period of time during the preceding calendar year must complete and file this report with the department on or before February 1<sup>st</sup> of the ensuing year. All annual reports for calendar year 2005 must be received by the department on or before the close of business on Wednesday, February 1, 2006.
3. All items on the form must be completed; do not leave any blanks. Reports with blanks are incomplete and will be deemed as "not filed" for purposes of any penalty. If an item is not applicable to business conducted by the licensee, enter "N/A", "none", "O", or "zero".
4. Work papers used to calculate and compile the information required by this form must be retained and made available when the licensee is examined by the department.
5. This report must be filed if a license was held for a portion of the reporting year and must be filed even if no loans were made or purchased. The original report, signed under penalty of unsworn falsification pursuant to NH RSA 641:3, must be physically delivered to the department; we cannot accept fax transmissions of reports. Failure to file the annual report or late filing of the annual report results in a statutory penalty of \$25 per day for each day the report is overdue.
6. No fee is required to file this annual report.
7. Information about loans should be provided for transactions made during the calendar year 2005. The figures in the three columns should reflect the company's sales finance loans and leases made by the licensee from all business locations in New Hampshire.
8. Do not double count sales finance company loan or lease transactions. Include each loan or lease transaction done by the company during 2005 only once on this form. Categorize loan transactions by deciding first whether each transaction was 1) a loan or 2) a lease, and then secondly by deciding whether the loan was 3) funded by the company (installment contracts, direct loans), or 4) purchased by or assigned to the company (indirect loans purchased from another company by the licensee).
9. Round dollar amounts to the nearest whole number.
10. Information about loans and repossessions should be provided for the calendar year 2005.

**SALES FINANCE COMPANY 2005 NH ANNUAL REPORT FORM 361-A-AR**

Reporting Period: January 1, 2005 through December 31, 2005

1. Legal name of licensee: \_\_\_\_\_
2. Trade Name (if applicable): \_\_\_\_\_
3. Licensee's federal tax ID number: \_\_\_\_\_ 2005 NH principal office license number: \_\_\_\_\_
4. Contact person for this report (this must be the company's duly authorized person who affirms the accuracy, signs and files this report)  
Name: \_\_\_\_\_ Title: \_\_\_\_\_
5. Communications: \_\_\_\_\_  
(Tel. no.) (Fax no.) (Cell) (E-mail Address)

**6. SCHEDULE A: MOTOR VEHICLE LOANS AND LEASES FUNDED, PURCHASED OR ASSIGNED DURING 2005 (Round dollar amounts to the nearest whole number)**

| Category  | Total Number of Loans or Leases in NH | Total Dollar Amount of Loans or Leases in NH |
|---|---------------------------------------|--|
| NH loans funded (installment contracts, direct loans) by the Licensee   |                                       | \$   |
| NH leases funded (lease contracts, direct loans) by the Licensee        |                                       | \$   |
| NH loans purchased by or assigned to the Licensee (indirect loans)      |                                       | \$   |
| NH leases purchased by or assigned to the Licensee (indirect loans)     |                                       | \$   |
| Total (of above) all types of loans & leases made in NH during 2005     |                                       | \$   |
|   |                                       |  |
| Total (all types) of NH Loans & Leases Outstanding at December 31, 2005 |                                       | \$   |

7. Does the licensee service NH loans? Yes ☐ No ☐. If "Yes", enter the number of NH automobile reposessions and/or impoundments for reporting period: \_\_\_\_\_

**Please note that pursuant to NH RSA 361-A:2,XII, all persons licensed by the NH Banking Department must report and amend their filing(s) for any material changes (including but not limited to change in owners, officers, directors, managers including NH branch managers, address, form of organization, contact information, FYE, etc.) to the documents and records on file with the department. The report of an amendment must be filed within 30 days of the event that requires the filing of an amendment.**

**AFFIRMATION**

The information provided in this report reflects the total amount of sales finance company business conducted by the licensee during 2005 in providing motor vehicle financing in the State of New Hampshire directly or indirectly to one or more retail buyers or in purchasing retail installment contracts from one or more retail sellers.

I subscribe and affirm, under penalty of perjury and under penalty of unsworn falsification pursuant to RSA 641:3,, that the statements made in this report have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to submit this report and to execute this affirmation. I understand that any misrepresentation made to the banking department may result in denial or revocation of the license to which this form relates.

I acknowledge on behalf of the licensee that the licensee will retain work papers and other documents used in the preparation of this report and that the licensee will make such records available to the department upon request or examination.

Date: \_\_\_\_\_

For \_\_\_\_\_  
(Print or type Licensee's name)By \_\_\_\_\_  
(Print or type name of the authorized signatory)Signature \_\_\_\_\_  
(Signed under penalty of Unsworn Falsification  
pursuant to NH RSA 641:3)

Title \_\_\_\_\_